



## APPEAL WITHDRAWAL

**MAIL TO:**

Wisconsin Department of Revenue  
State Board of Assessors  
2135 Rimrock Rd, Mail Drop 6-97  
PO Box 8971  
Madison WI 53708-8971

Appeal Number:	Assessment Year:	State Computer # or Local Account #:
Name of Property Owner:	Street Address of Property:	
Mailing Address:	Taxation District (Municipality):	
City, State & Zip Code:	County:	
Telephone Number:	Fax Number:	

**REAL ESTATE/PERSONAL PROPERTY ASSESSMENT & FILING PENALTY, AND EXEMPT COMPUTERS**

The Undersigned Certifies:

I, having filed an objection against the 20\_\_\_\_ assessment of the above property, requesting the assessment be reviewed pursuant to ss 70.995(8)(c), Wis. Stats., do hereby withdraw my appeal (for this year only) and certify that the assessed valuation as determined here below shall be sustained. I understand that the filing fee is non-refundable.

Assessed Value		
___ REAL ESTATE ASSESSMENT	Land	\$ _____
	Improvements	_____
___ REAL ESTATE FILING PENALTY	TOTAL	\$ _____

  

Assessed Value		
___ PERSONAL PROPERTY ASSESSMENT	Boats & Watercraft	\$ _____
	Machinery & Equipment	_____
___ PERSONAL PROPERTY FILING PENALTY	Furniture & Fixtures	_____
	All Other Personal Property	_____
	Buildings on Leased Land	_____
	Mobile Homes	_____
	TOTAL	\$ _____

  

Assessed Value		
___ EXEMPT COMPUTERS	TOTAL	\$ _____

**\_\_\_ CLASSIFICATION**

The Undersigned Certifies:

I, having filed an objection against the 20\_\_\_\_ classification of the above property/business for property tax assessment purposes, requesting the classification be reviewed pursuant to ss 70.995(8)(c), Wis. Stats., do hereby withdraw my appeal (for this year only) and certify that the classification as determined by the Department of Revenue be sustained. I understand that the filing fee is non-refundable.

Owner's Signature:	Telephone #:	Date:
Authorized Agent's Signature:	Telephone #:	Date: